	in this information to identify your ca								
Dec	Frank Emery	I Orok, II			_				
Debtor 2 Joann M. Tor (Spouse, if filing)		rok			_				
Uni	ted States Bankruptcy Court for the:	EASTERN DISTRICT READING DIVISION	OF PENNSYLVANIA	Α,	_				
Cas	se number				Ch	eck if this is	• •		
(If kn	own)		•			An amende	ed filing		
							ent showing postpof the following da		hapter 13
	fficial Form 106I					MM / DD/ Y	YYYY		
S	chedule I: Your Inco	ome							12/15
spoi attac	blying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O t1: Describe Employment	spouse is not filing with	h you, do not includ nal pages, write you	e informa	ation abou	t your spou umber (if kr	se. If more spac nown). Answer e	e is nee very qu	eded,
•	information.		Debtor 1			Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status	■ Employed			☐ Employed			
	attach a separate page with information about additional employers.	Occupation	☐ Not employed			☐ Not employed			
	Include part-time, seasonal, or self-employed work.	Employer's name	Solix Technolo	gies					
	Occupation may include student or homemaker, if it applies.	4701 Patrick Henry Dr Bldg 20 Santa Clara, CA 95054-1864							
		How long employed th	nere? <u>1 years</u>	s and 5 ı	months	_			
Par	t 2: Give Details About Mon	thly Income							
	mate monthly income as of the dates so you are separated.	te you file this form. If yo	ou have nothing to rep	oort for any	y line, write	\$0 in the sp	ace. Include your	non-filin	g spouse
	u or your non-filing spouse have more e, attach a separate sheet to this form		oine the information fo	or all emplo	oyers for the	at person on	the lines below. I	f you nee	ed more
					For D	ebtor 1	For Debtor 2 non-filing sp		
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	6,666.67	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$6,	666.67	\$	N/A_	

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Torok, Frank Emery II & Torok, Joann M.	_	Case	number (if known)		
				For	Debtor 1	For Debto	
	Copy	y line 4 here	4.	\$	6,666.67	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,488.57	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	374.33	\$	N/A
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A
	5g.	Union dues	5g.	\$_	0.00	\$	N/A
_	5h.	Other deductions. Specify:	— ^{5h.+}	_		+ \$	N/A
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ <u> </u>	1,862.90	\$	N/A
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,803.77	\$	N/A
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		\$	
	8d.	Unemployment compensation	8d.	\$ _	0.00	\$	N/A N/A
	8e.	Social Security	8e.	<u>\$</u> —	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	— 8g.	\$_	0.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	\$		+ \$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		4,803.77 + \$	N/A	A = \$ 4.803.77
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,803.77 + \$-	IN/	A = \$ 4,803.77
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your defineds or relatives. ot include any amounts already included in lines 2-10 or amounts that are not availy:	ependen				. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					. \$ 4,803.77
13.	Do y	ou expect an increase or decrease within the year after you file this form?	?				Combined monthly income
	_	No.					

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